201 East Main Street Batavia, New York 14020 (585) 343-0307 or (800) 592-0242

## Scoutmaster Recommendation

This report is to be used as a letter of recommendation for the Eagle Scout candidate noted below. Your answers to the following questions will be used by the Eagle Scout Board of Review as they consider the application of the Eagle candidate. All information provided will be kept strictly confidential and will become the sole property of the Board of Review. Please return the completed recommendation to the person indicated below. DO NOT return this form to the Eagle Candidate.

Eagle Candidate: Name:		School District
Address:	City	State: Zip:
Troop # Scouting Distr	rict:	
Return this form to: Name:		
Address:	City	State: Zip:
Please rate the Eagle candidate acc	ording to the following scale: (0 being n	ot at all, 10 being extremely well)  Comments:
Attends hikes and camping trips	0 • • • • 5 • • • 10	
Attitude toward younger scouts	0 • • • • 5 • • • • 10	
Attitude toward peer-aged Scouts	0 • • • • 5 • • • 10	
Attitude toward adults	0 • • • • 5 • • • 10	
Please comment on the following chara	acteristics:	
Trustworthy-		
Friendly-		
Courteous-		
Common Sense-		
Helpful-		
Clean-		

Please use the back of this form to add any additional information that you feel would be helpful to the Board of Review in arriving at a decision concerning the awarding of the Eagle Scout Rank to the candidate. In particular, please comment on the candidate's leadership abilities including both past and present positions held and what you see as his future leadership role. Thank you for taking time to complete this recommendation.

Signature	Position:	Date:
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